

Force Base and code named the Dakota Challenge, measured the readiness rate of one B-1B bomber wing when provided fully with the necessary spare parts, maintenance equipment, support crews, and logistics equipment. The Dakota Challenge found that a fully funded B-1B wing could maintain an unprecedented 84 percent mission capable rate. In addition, improvements were seen in other readiness indicators, including the 12-hour fix rate—a measure of how often a malfunctioning aircraft can be repaired and returned to the air within one half day.

By meeting a number of different challenges, the B-1B has earned justifiably the designation as the workhorse of the heavy bomber fleet.

Based on the analysis of the IDA report, the B-1B should assume a prominent role in our Nation's defense. The study recognizes that maintaining the B-1B as the workhorse of the heavy bomber fleet would yield the highest return on our defense investment and render the most cost-effective contribution to our Nation's heavy bomber requirements. With continued investments in weapons upgrades, I believe the B-1B will be an outstanding and effective conventional heavy bomber capable of projecting America's air power into the next century.

Mr. President, over the next several decades, the United States increasingly will be forced to respond rapidly and decisively to regional security threats around the globe. Holding 36 world records for speed, payload, and distance, the B-1B is uniquely suited to meeting our Nation's present and future defense challenges. In this period of budget constraints, I urge my colleagues to consider carefully the recommendations in the IDA Heavy Bomber Study before casting their vote on any defense measures affecting our heavy bomber force structure.

WAS CONGRESS IRRESPONSIBLE? THE VOTERS HAVE SAID YES

Mr. HELMS. Mr. President, before contemplating today's bad news about the Federal debt, let us do that little pop quiz once more. You remember—one question, one answer:

Question: How many million dollars are in \$1 trillion? While you are arriving at an answer, bear in mind that it was the U.S. Congress that ran up the Federal debt that now exceeds \$4.8 trillion.

To be exact, as of the close of business Tuesday, May 9, the exact Federal debt—down to the penny—stood at \$4,853,699,696,611.41. This means that every man, woman, and child in America now owes \$18,424.73 computed on a per capita basis.

Mr. President, back to the pop quiz: How many million in a trillion? There are a million million in a trillion.

HONORING MARGARET STANFILL FOR BRAVERY AND SERVICE DURING WORLD WAR II

Mr. ASHCROFT. Mr. President, I rise today to salute a Missourian who has distinguished herself for her bravery while in service to her country, Margaret Stanfill of Hayti, MO. As a nurse serving in the U.S. Army Nurses Corps during the Second World War, Margaret served her country with unprecedented bravery and dedication while participating in some of the greatest Allied successes of the war.

Margaret Stanfill was documented as the first American nurse to arrive on the beaches of Normandy during the Allies' D-day invasion of France on June 6, 1944. The wire service accounts of the invasion reported that the first nurses to arrive by barge, "waded ashore while battle-weary soldiers blinked in astonishment." The nurses, led by Margaret Stanfill and clothed in two layers of men's uniforms with steel helmets, went to work immediately setting up dressing stations in pup tents and ministering to the wounded. Many of the wounded were paratroopers injured as part of the initial assault. I rise today to salute Margaret's bravery and leadership, not only at Normandy, but throughout her life.

Margaret Stanfill grew up in Hayti, in the bootheel of Southeastern Missouri near the Tennessee border, graduating from Hayti high school in 1938. While in high school Margaret was a 4-year member of the basketball team, serving 1 year as team captain. She was also a 4-year member of the Hayti high school tennis team and was county high school's girls singles champion. After graduation, Margaret entered nurses training at the Baptist Hospital in Memphis, TN, graduating from there in 1940. After a year in private nursing, Margaret felt the call of service and entered the U.S. Army Nurses Corps, training at Camp Tyson.

Margaret arrived in England for additional training on August 1, 1942. By November of that year, she was among the first nurses to arrive on shore during the Allied invasion to liberate North Africa. The scenes of Margaret and her surgical operating unit being carried ashore from barges on the shoulders of their male colleagues appeared in news reels shown around the world. Her unit followed the Allied advance through North Africa into Sicily, where Margaret followed the infantry onto European soil at the invasion of Italy before returning to England for further training preceding the D-day Invasion.

Margaret Stanfill returned from the war and married Wick P. Moore, an Army captain she served with during the North Africa campaign. They settled down in Texas and had three children, two sons and a daughter. I once again salute Margaret Stanfill Moore for her service and bravery in playing a role in some of the most crucial events in the history of our Nation and our world. Her love of freedom and willing-

ness to give of herself and her talents for her country sets an example of service of which all of us can be proud.

NONPROFIT HOSPITALS

Mr. SPECTER. Mr. President, many may believe that health care reform is not an issue in the 104th Congress. But I have been advocating reform in one form or another throughout my now 15 years in the Senate, and I continue to do so. I have come to the floor on 14 occasions over just the last 3 years to urge the Senate to address health care reform. On the first day the Congress was in session in 1993 and again on the first day in 1995, I introduced comprehensive health care legislation. The Health Care Assurance Act of 1995, S. 18, which I introduced on January 4 of this year, is comprised of reform initiatives that our health care system needs and can adopt immediately. They are reforms which can both improve access and affordability of coverage and health care delivery and implement systemic changes to bring down the escalating cost of care. Today, I again address my colleagues on the issue of health care access. I want to bring to the Senate's attention a particular component of our health care delivery system which is uniquely poised to provide innovative services which respond to the particular needs of individual communities, but which is in jeopardy—nonprofit hospitals.

In my view it is indispensable that there be comprehensive affordable, accessible health care for all Americans. I believe the essential question is whether we have sufficient resources, that is medical personnel and hospital, laboratory, diagnostic and pharmaceutical facilities to deliver services. I think we do; and nonprofit hospitals are an important resource of innovative, community-based care. Well over 80 percent of the hospitals in this country have been and are nonprofit institutions. Most nonprofits were founded decades ago and arose from religiously or ethnically identified groups and so were dedicated to serving a particular community. Most have adhered to this dedication to community and all of them serve without restriction or preference. There are approximately 80,000 voluntary trustees, leaders in their respective communities giving freely of their time, their energies, and their money to raise the level of health care in those communities. However, I am concerned that recent trends in the health care market, including the growth of large for-profit hospital systems, and the emphasis on costs and profits of many managed care organizations as they become economically dominant, threaten the community health focus of nonprofit hospitals.

We stand at the threshold of dramatic breakthroughs in understanding, preventing, and treating a variety of diseases. Clinical application of the breakthroughs in research will yield wondrous results which will alleviate